## TRIPLE-A SUMMER CAMP

## "Special" Week #11 Grades K-12

Please print the attached registration form and submit to Dept of Recreation, 535 E. Main Street (first time camper must complete necessary medical forms available at time of registration)

Please Print Camper Name:			D.O.B:		
Parent(s) Name:			Gender:		
Address:		Grade Entering in Fall '13			
			Telephone #		
			K, September 3 <sup>rd</sup> -6 <sup>th</sup> (Tuaily Rate: \$38.00 per da		
For <b>daily</b> campers, please circle	days	desired:			
Tuesday	Wednesday		Thursday	Friday	
<b>Total Amount Due</b> :	\$				
Registration Fee:	\$	N/A			
<b>Amount Enclosed</b> :	\$				
Cash/Check/Credit Card Please make checks payable to: Check #:	Town	ship of Evesham	, and mail to 984 Tucl	kerton Rd., Marlton, NJ 08053	
Credit Card (please circle): Visc Credit Card Number:				Sec Code:	
Parent's /Guardian Signature: _					

My signature indicates that I have read the Evesham Township Summer Camp Policies and Procedures

For additional information, please contact Department of Recreation at 856-985-9792